

TEXAS VETERANS COMMISSION

ACCREDITED INSTITUTIONS

GUIDE FOR SCHOOLS IN PREPARING AN APPLICATION FOR APPROVAL TO TRAIN VETERANS AND OTHER ELIGIBLE PERSONS UNDER SECTION 3675, TITLE 38, UNITED STATES CODE

Return to:

Connie Jacksits, Director
Veterans Education
Texas Veterans Commission
P.O. Box 12277
Austin, Texas 78711-2277
(512) 463-3168 or (877) 898-3833 Toll-Free



"Helping Veterans Starts Here"

TEXAS VETERANS COMMISSION

Veterans Education

P.O. Box 12277

Austin, Texas 78701

(512) 463-3168 or (877) 898-3833 Toll-Free

Application for Approval to Train VA Eligible Persons (Accredited Institutions)

☐ Original Request

☐ Update

- ☐ I certify that the school below HAS operated as an educational institution for the last two years with continuous student enrollment.
☐ I certify that the school below HAS NOT operated as an educational institution for the last two years.

1. Name of School _____

2. Address of School _____
(Physical location)

Mailing Address _____
(VA Certifying Official) (This address should identify the location where your approval items and VA correspondence are to be sent.)

3. Accrediting Body _____
(Note: Must be a national accrediting agency recognized by the United States Secretary of Education. "Candidate" status is not a basis for approval as accredited.)

Federal, State or Municipal
Licensing Body or Authority _____

4. Name of President/Director/Owner _____

5. Name of VA Certifying Official _____

Phone _____ Fax _____ E-mail _____

6. The above-named institution requests approval to train VA eligible persons in the programs listed on the attached pages.
(Attach the listing of those degree programs to be considered for approval. For certificate programs, use the enclosed Calendar and Class Schedule(s), as applicable, for the Certificate Programs to be considered for approval.)

I understand that: (Reference 38 Code of Federal Regulations 21.4209)

- The school will make available to the authorized government representative records and accounts pertaining to veterans or eligible persons who received educational assistance.
- Other students' records necessary for the Department of Veterans Affairs and its authorized representatives to ascertain institutional compliance.
- The school must retain records and accounts for at least three years following the termination of students' enrollment period.

I certify that (will be verified by State Approving Agency before approval):

- The educational institution keeps adequate records, as prescribed by the State Approving Agency, to show the progress and grades of the eligible person or veteran and to show that satisfactory standards relating to progress and conduct are enforced.
- The educational institution maintains a written record of the previous education and training of the eligible person or veteran that clearly indicates that appropriate credit has been given by the educational institution for previous education and training, with the training period shortened proportionately.
- The programs, curriculum, and instruction are consistent in quality, content, and length with similar programs in public schools and other private schools in the state, with recognized standards.
- The school has adequate space, equipment, instructional materials, and instructor personnel to provide training of good quality.
- Educational and experience qualifications of staff and instructors are adequate.

True and Correct Statement I certify that the information contained in this application and attachment(s), catalog or bulletin, student handbook, supplements, addenda, and the supporting approval material is true and correct in content and policy as required by 38 Code of Federal Regulations 21.4253.

Signature of Authorized School Official

Title

Date

SUPPORTING APPROVAL MATERIAL

ANY CHANGES TO THE CATALOG AFFECTING THIS APPROVAL SHOULD ALSO BE SUBMITTED AS ADDENDA ITEMS. IN ADDITION, CHANGES AFFECTING THE APPROVAL MAY BE SUBMITTED ANY TIME DURING THE YEAR. SUBMIT THESE CHANGES WITH A TRUE AND CORRECT STATEMENT.

A. Submit Three Copies of Your Current Catalog or Bulletin: Catalogs can be hard copy or, if submitted on disk, must be permanent (PDF or similar documents) files, not website screen shots. Although not required, submission of a hard copy catalog can facilitate review and processing. If an item listed below is not in the catalog (bulletin), provide additional publications or a written statement to be submitted as addenda to the catalog or bulletin.

☐ Check this box if a **previously approved** multiple year catalog is still applicable and then proceed to Item B.

<i>List page number where the items below can be found.</i>	<i>Undergraduate</i>	<i>Graduate</i>	<i>Certificate</i>
<input type="checkbox"/> academic calendar for degree programs	_____	_____	_____
<input type="checkbox"/> academic calendar for certificate programs	_____	_____	_____
<input type="checkbox"/> grading system (to include incomplete grades)	_____	_____	_____
<input type="checkbox"/> progress policies for VA students (see attached guidelines)	_____	_____	_____
<input type="checkbox"/> conduct policy	_____	_____	_____
<input type="checkbox"/> attendance policy	_____	_____	_____
<input type="checkbox"/> graduation requirements and minimum GPA	_____	_____	_____
<input type="checkbox"/> policy regarding transfer credit	_____	_____	_____
<input type="checkbox"/> progress records (transcripts) kept by the school	_____	_____	_____
<input type="checkbox"/> progress records (grades) furnished to students	_____	_____	_____
<input type="checkbox"/> accrediting body	_____	_____	_____
<input type="checkbox"/> tuition, fees, course costs	_____	_____	_____
<input type="checkbox"/> drop periods	_____	_____	_____

B. ☐ COMPLETE THE APPROPRIATE CALENDAR/CLASS SCHEDULE FORM (CLOCK OR CREDIT HOUR) FOR CERTIFICATE PROGRAM(S) TO BE CONSIDERED FOR APPROVAL.

C. IF YOU OFFER THE FOLLOWING TYPES OF TRAINING, CHECK THE APPROPRIATE BOX. IF ITEM IS NOT CHECKED, APPROVAL CANNOT BE CONSIDERED.

- ☐ Open Circuit TV Courses
- ☐ Independent Study (if you offer degrees, your school will automatically be approved for this mode of instruction including other nonresident training - internet, distance education, individual correspondence courses, etc.)
- ☐ Practical Training Courses and Request for Approval under 38 CFR 21.4265 (*Only if offered at your school. DO NOT include a list of courses. Mark the applicable box on the form, sign and date, and submit.*)
 - ☐ Registered Nursing Hospital/Fieldwork Courses
 - ☐ Licensed Vocational Nursing Courses
 - ☐ Medical and Dental Specialty Courses
 - ☐ Professional Training Courses (e.g., Teacher Certification)
 - ☐ Practical Training

D. ☐ COMPLETE THE LIST OF OFF CAMPUS LOCATIONS WHERE TRAINING IS PROVIDED.

E. ☐ DEVELOPMENTAL/REMEDIAL/DEFICIENCY COURSES (IF APPLICABLE).

- F. ☐ COOPERATIVE EDUCATION COURSES AND REQUEST FOR APPROVAL (IF APPLICABLE).
- G. ☐ REVIEW AND UPDATE THE ATTACHED LIST OF YOUR APPROVED PROGRAMS. DO NOT INCLUDE ANY CERTIFICATE OR NONDEGREE PROGRAMS UNLESS THEY ARE LISTED ON ONE OF THE CALENDAR/CLASS SCHEDULES.

- H. ☐ CURRENT FEDERAL, STATE, MUNICIPAL LICENSE, OR CERTIFICATE OF AUTHORITY/APPROVAL WITH LIST OF APPROVED PROGRAMS (for TWC-licensed Career Schools).

I. COMPLETE AS REQUIRED:

- ☐ VA Forms 22-8794, 22-1919, 27-8206 (*not required if previously submitted and still valid*)
- ☐ Power of Attorney Certification (*not required if previously submitted*)
- ☐ Request for Waiver – 85/15 Percent (*not required if previously submitted*)
- ☐ Advanced Payment Certification (*not required if previously submitted*)

- J. ☐ SCHEDULE OF CLASS/COURSE OFFERINGS (all courses must be described in the catalog or addenda):

- ☐ Fall 2011
- ☐ Spring 2012
- ☐ Summer 2012
- ☐ Other _____

- K. ☐ CHANGE OF OWNERSHIP/ADDRESS (IF APPLICABLE).

- L. ☐ VETERAN STUDENT ATTENDANCE POLICY (FOR CAREER SCHOOLS LICENSED BY TWC).

- M. FOR INSTITUTIONS WITH GRADUATE PROGRAMS OFFERED IN CREDIT HOURS, PROVIDE THE NUMBER OF CREDIT HOURS THAT CONSTITUTE THE FOLLOWING AT YOUR SCHOOL:

(Note: The U.S. Department of Veterans Affairs will determine training time for all terms for undergraduate students. Complete for graduate students only.)

	Graduate Fall/Spring	Graduate Summer	Graduate Mini-terms
Full time	_____	_____	_____
Half (1/2) time	_____	_____	_____
Three-quarter (3/4) time	_____	_____	_____
Less than half (1/2) time	_____	_____	_____
Quarter (1/4) time	_____	_____	_____

- N. FOR INFORMATION ONLY -- TRAINING TIMES FOR CLOCK HOUR-BASED PROGRAMS:

	Where Theory Predominates	Where Shop Predominates
Full time (clock hours per week)	18	22
¾ time	13 – 17	16 – 21
½ time	9 – 12	11 – 15
Less than ½ time	5 – 8	6 – 10
¼ time	1 – 4	1 – 5

CALENDAR AND CLASS SCHEDULE FOR CERTIFICATE PROGRAMS
(CERTIFIED IN CREDIT HOURS FOR VA PURPOSES)

Name and Location of School _____

School Year: _____ Schedule: _____

List only those certificate programs for which you are requesting approval to train VA students. Programs must be listed in the catalog or addendum.

Complete Program Name		Catalog Page No.	Vocational Objective	1 st Day of Classes for Each Term	Last Day of Classes for Each Term	Total Program Length
<i>(Example)</i>	<i>Vocational Nursing</i>	<i>39</i>	<i>LVN</i>	<i>8/24/11 01/05/11</i>	<i>12/11/11 05/20/11</i>	<i>44 SCH</i>
<i>(Example)</i>	<i>Paralegal</i>	<i>141</i>	<i>Paraprofessional who provides legal assistance to attorneys</i>	<i>See academic calendar/page 7 of catalog</i>		<i>36 SCH</i>
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____
_____	_____	_____	_____	_____	_____	_____

List the specific holidays (include day, month, year), break periods and breaks between terms, etc.

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The specific vocational objective should be listed for each certificate program and should be one that leads to an occupation. The program should provide students with adequate skills for profitable employment upon graduation. Also, the program's length should provide sufficient student-instructor contact hours to train the student adequately and to meet the standards of the student's chosen vocation or profession. Additionally, no two programs should lead to the same objective. **INDIVIDUAL CLASS SCHEDULES SHOULD BE USED WHEN NECESSARY. SCHEDULE MAY BE SUBMITTED ON A SEPARATE SHEET IF IT DOES NOT FIT THIS FORMAT (MUST INCLUDE THE SAME INFORMATION).**

CALENDAR AND CLASS SCHEDULE FOR CERTIFICATE PROGRAMS

(CERTIFIED IN CLOCK HOURS FOR VA PURPOSES)

Name and Location of School

School Year: _____ Schedule: _____

List only those certificate programs for which you are requesting approval to train VA students. Programs must be listed in the catalog or addendum.

Complete Program Name		Catalog Page No.	Vocational Objective	1 st Day of Classes for Each Term	Last Day of Classes for Each Term	Days/week	Hours/day
(Example)	Vocational Nursing	63	LVN	8/24/11	12/11/11	TWThF	5
(Example)	Automotive	Addenda	Auto Mechanic	1/10/12	5/15/12	TWThFS	7.5
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____
_____		_____	_____	_____	_____	_____	_____

List the specific holidays (include day, month, year), break periods and breaks between terms, etc.

_____	_____	_____	_____	_____
_____	_____	_____	_____	_____
_____	_____	_____	_____	_____

The specific vocational objective should be listed for each certificate program and should be one that leads to an occupation. The program should provide students with adequate skills for profitable employment upon graduation. Also, the program's length should provide sufficient student-instructor contact hours to train the student adequately and to meet the standards of the student's chosen vocation or profession. Additionally, no two programs should lead to the same objective. **INDIVIDUAL CLASS SCHEDULES SHOULD BE USED WHEN NECESSARY. SCHEDULE MAY BE SUBMITTED ON A SEPARATE SHEET IF IT DOES NOT FIT THIS FORMAT (MUST INCLUDE THE SAME INFORMATION).**

PRACTICAL TRAINING

(Title 38 Code of Federal Regulations 21.4265)

Practical training is academic training that includes actual job training. These courses are an integral part of the course, required for the completion of the course, and are under the direction and supervision of the school. If specifically approved, these types of courses can be certified either in credit hours or clock hours, whichever is more advantageous to the veteran.

CHECK THE TYPE OF PRACTICAL TRAINING BEING REQUESTED FOR APPROVAL

- ☐ Medical/Dental Specialty Courses (clinical training given off-campus such as medical/dental assistant externships or X-ray technician)
- ☐ Registered Nursing Courses (clinical courses with hospital or fieldwork phases)
- ☐ Licensed Vocational Nursing Courses (academic subjects and clinical training)
- ☐ Professional Training Courses (including Teacher Certification courses)
- ☐ Practical Training (externships or practicums in any other field that require class attendance on at least a weekly basis to provide for interaction between instructor and student)

I request that the applicable practical training courses be assessed as institutional training under the provisions of 38 CFR 21.4265. I certify that these courses are an integral part of the curriculum, are required for graduation, are under the direction of the school, and the student remains enrolled in the school during these courses. These courses may be certified in either credit or clock hours.

Signature and Title of School Official

Date

MAIN AND OFF-CAMPUS LOCATIONS

(Complete Street Address, City, State, Zip Code)

Name and Location of School

(1) LIST CAMPUSES (INCLUDING MAIN) THAT MAINTAIN ALL RECORDS AND HAVE ADMINISTRATIVE CAPABILITY:

(2) LIST ALL OTHER OFF-CAMPUS LOCATIONS THAT PROVIDE INSTRUCTION:

Use additional sheets if necessary

- No out-of-state or out-of-country locations should be listed.
- Affiliated hospitals for nursing or medical and dental programs should not be listed.
- Certificate programs offered by a **private, profit or non-profit** IHL will be subject to the two-year period of operation requirement before they can be approved at off-campus locations.

DEVELOPMENTAL/REMEDIAL/DEFICIENCY COURSES

Reference 38 CFR 21.4200(s) (t)

Name and Location of School

Course Number

Course Title

Catalog Page Number or Addendum

DEFINITION: Developmental/Remedial/Deficiency courses are courses designed to overcome a deficiency at the elementary or secondary level in a particular area of study (usually English or Math) under provisions of 38 CFR 21.4200(s) and (t); and 38 CFR 21.4235(f) and 38 CFR 21.4237(f) for ESL.

Documentation through testing must be available to support the need for each specific developmental/remedial/deficiency course.

NOTE: Courses cannot be used for credit toward completion of degree or certificate program requirements. Also, they cannot be used as electives. Personal enhancement courses cannot be approved as developmental/remedial/ deficiency courses for VA training.

COOPERATIVE EDUCATION COURSES

REQUEST FOR APPROVAL OF COOPERATIVE EDUCATION COURSES UNDER THE PROVISIONS OF 38 CODE OF FEDERAL REGULATIONS 21.4233(a)

Name of School _____

Location of School _____

Accrediting Body _____

We request that the following list of cooperative education courses be approved under the provisions of 38 CFR 21.4233(a).

We certify that:

the alternate in-school periods of the course are at least as long as the alternate periods in the business or industrial establishment;

the course is set up as a cooperative course in the school catalog or other literature of the school;

the school itself arranges with the employer's establishment for providing the alternate on-job portion periods of training on such basis that the on-job portion of the course will be training in a real and substantial sense and will supplement the in-school portion of the course;

the school arranges directly with the employer's establishment for placing the individual student in that establishment and exercises supervision and control over the student's activities at the establishment to an extent that assures training in a true sense to the student; and

the school grants credit for the on-job portion of the course for completion of a part of the work required for granting a degree or diploma.

<u>Course Number</u>	<u>Course Title</u>	<u>Catalog Page Number or Addendum</u>
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Signature and Title of School Official

Date

POWER OF ATTORNEY CERTIFICATION

I certify that this institution does not have a power of attorney to negotiate Department of Veterans Affairs (VA) educational benefit checks nor does this institution use coercive procedures or practices to limit a veteran or other eligible person's disposition of the proceeds of a VA check. Checks are not stamped "For Deposit Only" to the school's account for endorsement by the student. This institution does not have a joint bank account with any VA student.

- ☐ The institution **DOES** plan on receiving VA students' monthly education benefit checks at the school's address.
- ☐ The institution **DOES NOT** plan on receiving VA students' monthly education benefit checks at the school's address.

Signature of School Official

Date

Title of School Official

Name of School

Address of School

City/State/Zip

REQUEST FOR WAIVER – 85/15 PERCENT

This is to certify that our current enrollment of Department of Veterans Affairs (VA) students receiving VA educational benefits is 35 percent or less of the total school enrollment.

We do hereby request a waiver of the 85/15 percent reporting requirement. We do understand that the above waiver would not apply to any course/program in which the percentage of VA students exceeds 85 percent.

Signature of School Official

Date

Title of School Official

Name of School

Address of School

City/State/Zip

ADVANCE PAYMENT CERTIFICATION

- ☐ Our institution **DOES NOT** wish to participate in the VA's advance payment program.
- ☐ Our institution **DOES AGREE** to participate in the VA's advance payment program, and we make the following certification:

I certify that advance payment checks will be maintained in a secure place, be given to the VA student upon registration, but not earlier than 30 days prior to the first day of classes, and that we will furnish verification of enrollment as prescribed by VA directives.

Signature of School Official

Date

Title of School Official

Facility Code

Name of School

Address of School

City/State/Zip

COMPLETE ONLY IF APPLICABLE

CHANGE OF OWNERSHIP (38 CFR 21.4251)

(Complete this section if change has occurred within the last two years)

School Name

Dates of Ownership

Owner

Current Owner Certification

I certify that:

- The school remains essentially the same; i.e., there are no major changes in the type or number of faculty, student body, or courses offered;
- As the new owner, I have acquired all, or substantially all, of the school's assets, which are directly related to the school's educational activities;
- As the new owner, I assume liability on the date the school is sold for all or substantially all, of the outstanding debts of the school. I assume only the debts incurred as a direct result of the school's educational activities under the previous ownership. This includes overpayments of educational assistance for which the school is liable or may become liable under 38 CFR 21.4009;
- As the new owner or manager, I will make all refunds which, on the date the school was sold, may be due to veterans and eligible persons under 38 CFR 21.4254(c)(13); and
- As the new owner, I agree to honor all student contracts that veterans, reservists, or other eligible persons signed or that school authorities approved before the effective date of the change in ownership.

Signature of Owner

Print name

Date

CHANGE OF ADDRESS (38 CFR 21.4251)

I certify that the currently approved school: _____
(Name of School)

Current Address

Former Address

has relocated effective _____ and meets the following approval criteria:

- The new location is within normal commuting distance of the previous location
- The school has essentially the same faculty and student body
- The school offers the same courses
- The school has maintained "continuity of operation." It has not been closed or otherwise unavailable for instruction for a period in excess of 30 days during the course of the move.

Signature of Owner

Print name

Date

PROGRESS POLICY GUIDELINES

Institutions are required by law to have and to enforce standards of progress in order for their programs to be approved for VA benefits. These standards should be stated plainly in the catalog or bulletin. The policy must define the following:

1. The school's grading system (INCLUDING INCOMPLETE GRADES);
2. The school's grading period;
3. The minimum grades considered satisfactory;
4. A clear description of any probation period;
5. Conditions for interruption of training due to unsatisfactory grades or progress;
6. Conditions for a student's reentrance/admission following dismissal/suspension for unsatisfactory progress.

School officials are responsible for enforcing the established standards of progress. This will require that you specify intervals between initial enrollment and graduation/completion when each student's progress will be evaluated.

Schools that provide a period of academic probation may not continue to certify a veteran or eligible person for an indefinite period of time. It is not unreasonable to expect that an institution will report a termination due to unsatisfactory progress if a student remains on academic probation beyond two (2) terms, quarters, or semesters without an improvement in his/her academic standing.

Please ensure that your progress policies for undergraduate, graduate, law school, and certificate programs meet the above requirements. If your catalog does not contain all of this information, a progress policy must be submitted as an addendum to the current catalog (and noted on the true and correct statement).

NOTE: PROGRESS POLICIES FOR VA STUDENTS CANNOT BE LESS STRINGENT THAN POLICIES FOR OTHER STUDENTS.

ATTENDANCE POLICY FOR VA STUDENTS

EFFECTIVE September 1, 2005

For Department of Veterans Affairs (DVA) purposes, recording of attendance will be subject to the following policy:

ATTENDANCE POLICY FOR VA STUDENTS

Students using veterans' benefits to attend _____ will have attendance monitored until the time the student drops, graduates, or completes the program. Unsatisfactory attendance will be reported to the DVA even if the VA student has completed the required number of hours to complete and no refund is due the student and/or refund sources. Therefore, the attendance policy (20% of the total program and/or being absent five [5] consecutive days) will apply throughout the student's stay in school. All violations of the attendance policy will be reported to DVA on VA Form 22-1999b within 30 days at such time the student exceeds the allowed number of absences.

I have read, understand, and will comply with this policy for the veteran students certified for GI Bill benefits.

Signature of Authorized School Official

Title

Date

**DEPARTMENT OF VETERANS AFFAIRS
STATEMENT OF ASSURANCE OF COMPLIANCE
WITH EQUAL OPPORTUNITY LAWS**

(hereinafter called the "Signatory")

(Name of Organization, Institution, or Individual)

HEREBY AGREES THAT

It will comply with Title VI of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq.), Title IX of the Education Amendments of 1972, as amended (20 U.S.C. 6101 et seq.), and all Federal regulations adopted to carry out such laws. This assurance is directed to the end that no person in the United States shall on the ground of race, color, national origin (Title VI), handicap (Section 504), sex (Title IX, in education programs and activities only), or age (Age Discrimination Act) be excluded from participation in , be denied the benefits of , or be subjected to discrimination under any program or activity of the Signatory receiving Federal financial assistance or other benefits under statutes administered by VA (Department of Veterans Affairs), the ED (Department of Education), or any other Federal agency. This assurance applies whether assistance is given directly to the recipient or indirectly through benefits paid to the student, trainee, or other beneficiary because of enrollment or participation in a program of the Signatory.

The Signatory HEREBY GIVES ASSURANCE that it will promptly take measures to effect this agreement.

If any real property or structure thereon is provided or improved with the aid of Federal financial assistance extended to the Signatory by VA or ED, this assurance shall obligate the Signatory, or in the case of transfer of such property, any transferee, for the period during which the real property or structure is used for a purpose for which the Federal financial assistance is extended or for another purpose involving the provision of similar services or benefits. In all cases, this assurance shall obligate the Signatory for the period during which the Federal financial assistance is extended to any of its programs by VA, ED or any other Federal agency.

THIS ASSURANCE is given in consideration of and for the purpose of obtaining Federal financial assistance, including facilities furnished or payments made under sections 104 and 244 (1) of Title 38, U.S.C. Also, sections 1713, 1720, 1720A, 1741-1743, 2408, 5902(a)(2), 8131-8137, 8151-8156, (formerly 613, 620, 620A, 641-643, 1008, 3402(a)(2), 5031-5037, 5051-5056 respectively) and 38 U.S.C. chapters 30, 31, 32, 35, 36, 82, and 10 U.S.C. chapter 106. Under the terms of an agreement between VA and ED, this assurance also includes Federal financial assistance given by ED through programs administered by that agency. Federal financial assistance is understood to include benefits paid directly to the Signatory and/or benefits paid to a beneficiary contingent upon the beneficiary's enrollment in a program or using services offered by the Signatory.

The Signatory agrees that Federal financial assistance or other benefits will be extended in reliance on the representations and agreements made in this assurance; that VA or ED will withhold financial assistance, facilities, or other benefits to assure compliance with the equal opportunity laws; and that the United States shall have the right to seek judicial enforcement of this assurance.

THIS ASSURANCE is binding on the Signatory, its successors, transferees, and assignees for the period during which assistance is provided. The Signatory assures that all contractors, subcontractors, subgrantees, or others with whom it arranges to provide services or benefits to its students or trainees in connections with the Signatory's programs or services are not discriminating against those students or trainees in violation of the above statutes.

The person whose signature appears below is authorized to sign this assurance.

(Date)

(Signature of authorized official)

(Title of authorized official)

(Mailing Address)

**CONFLICTING INTEREST CERTIFICATION FOR PROPRIETARY SCHOOLS ONLY**

NAME AND ADDRESS OF INSTITUTION

PURPOSE: This form informs individuals that the law has restrictions concerning any potential conflict of interest. (See certifications (1) and (2) below). These certifications not only apply to chapters 31 and 36 of Title 38, U.S.C., but also apply to the following programs administered by the Department of Veterans Affairs (VA):

MGIB	Montgomery GI Bill – Active Duty Educational Assistance Program (Chapter 30 of Title 38, U.S. Code)
VEAP	Veterans' Educational Assistance Program (Chapter 32 of Title 38, U.S. Code)
DEA	Dependents' Educational Assistance (Chapter 35 of Title 38, U.S. Code)
MGIB-SR	Montgomery GI Bill – Selected Reserve Educational Assistance Program (Chapter 1606, formerly known as Chapter 106, of Title 10, U.S. Code)
EAPP	Educational Assistance Pilot Program (Section 903 of Public Law 96-342)

(1) PROPRIETARY PROFIT SCHOOLS ONLY

The law prohibits employees of VA and the State Approving Agency (SAA) from owning any interest in an educational institution operated for profit. In addition, the law prohibits these employees from receiving any wages, salary, dividends, gifts, or services from private profit schools. These provisions may be waived if VA determines that no detriment will result to the government, or to veterans or eligible persons enrolled (38 U.S.C. 3683). Please list below those VA and SAA employees known by you who may have a potential conflict of interest under this provision. If there are none, please enter the word "none."

NAME AND TITLE OF EMPLOYEE(S)

DESCRIPTION OF ASSOCIATION WITH SCHOOL

(2) ALL PROPRIETARY SCHOOLS

38 C.F.R.21.4202© prohibits the approval of any veteran or eligible person in any proprietary school of which the veteran or trainee is an official authorized to sign certificates of enrollment or verifications/certifications of attendance, an owner or an officer. Please list below the names and VA file numbers (claim or Social Security Numbers) of any certifying officials, owners or officers of your school who receive VA educational assistance based on an enrollment in your school. If there are none, please enter the word "none."

NAME AND TITLE OF EMPLOYEE(S)

VA FILE NUMBER

DATES OF ENROLLMENT WITH YOUR SCHOOL

FROM

TO

I DO HEREBY CERTIFY that the entries above are true and correct to the best of my knowledge. I agree to immediately notify VA of any potential violations of the above prohibitions.

SIGNATURE OF PRESIDENT OR CHIEF ADMINISTRATIVE OFFICIAL OR SCHOOL

TITLE

DATE

